FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90114 022 ***150.00

DOCU	MENT # 841755				
1. Corporatio					
THE STATE OF), ((, , , , , , , , , , , , , , , , , , ,) (18918) (1891 (1898) (1888) (1888) (1888) (1898) (1891 (1898) (1898)	81811 81811 B1811 81811 1881
Principal Plac	e of Business	Mailing Address			1
6625 S.W. 95TH COURT 6625 S.W. 95TH COURT					
MIAMI FL 3317: 	J	MIAMI FL 33173		DO NOT WRITE IN THIS SP	ACE
				3. Date Incorporated or Qualifed	
				11/01/1978	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	# -1-	Suite, Apt. #, etc.		98-0051928	Not Applicable \$8.75 Additional
Suite, Apt.	#, etc.	<u>⊢</u> , ·		5. Certifcate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23	•	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intang	
24	25	29 30)	Taroonar Toporty Tax:	Yes No
<u> </u>	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered Ag	ent
ONDARZA, JUAN J					
	S.W. 95TH COURT		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33173			83		
					85 Zip Code
			84 City	PL	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes,	the above-named corp	poration submits this statement for the purpose of cha on's board of directors. I hereby accept the appointm	anging its registered
office or i	registered agent, or both, in the State am familiar with, and accept the milig	ations of, Section 607.0505, Florida	a Statutes.	, /	lonk do registered
SIGNATURE	men y on	daya JUA	NJ. ON.	SARZA 3/1/19	99
40	_//	ent and title applicable. (NOTE: Re ND DIRECTORS	gistered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		Change
NAME	ONDARZA, FRANCISCO		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		İ
CITY-ST-ZIP	CARACAS, VENEZUELA		14 CITY-ST-ZIP		7.0
TITLE	S	☐ DELETE	2.1 TITLE	Ł	Change Addition
NAME	ONDARZA, JUAN J		2.2 NAME		\
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33173	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME	_	
STREET ADDRESS			3 3 STREET ADDRESS		· ·
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	•	
STREET ADDRESS			4.3 STREET ADDRESS		Ì
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Change
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME	L	Change Addition
NAME			5.2 NAME 5.3 STREET ADDRESS	•	
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE		Change Addition
_ ···		_			
NAME			6.2 NAME		1

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

305-595-4772